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# GRANT CONTRACT BETWEEN THE STATE OF TENNESSEE, DEPARTMENT OF FINANCE AND ADMINISTRATION OFFICE OF CRIMINAL JUSTICE PROGRAMS AND Shelby County Government

Office of Criminal Justice Programs, hereinafter referred to as the "State" and Shelby County Government, hereinafter referred to as the "Grantee," is for the provision of administering federal grant funds for the improvement of the criminal justice system as required by the STOP Violence Against Women Grant Program, as further defined in the "SCOPE OF SERVICES." This Grant Contract, by and between the State of Tennessee, Department of Finance and Administration,

Grantee Federal Employer Identification Number: 62-6000841

# A. SCOPE OF SERVICES:

- <u>A</u>.1 Services section or elsewhere in this Grant Contract. Scope of Services and shall meet all service and delivery timelines specified in the Scope of The Grantee shall provide all service and deliverables as required, described, and detailed by this
- A.2. incorporated into this Grant Contract as Attachment A, attached hereto. in the grantee's application under which this Grant Contract is awarded, and that is hereby The Grantee shall comply with and perform all services, functions, and/or requirements as stated
- Α.3. Justice Programs. The Grantee shall comply with all reporting requirements described in the Grantee's application, in the Office of Criminal Justice Programs Administrative Manual located on the website at <a href="http://www.state.tn.us/finance/rds/ocjp.htm">http://www.state.tn.us/finance/rds/ocjp.htm</a> and in any correspondence from the Office of Criminal
- A.4. the Office of Criminal Justice Programs Administrative Manual located on the website at Justice Programs http://www.state.tn.us/finance/rds/ocip.htm. The Grantee agrees to comply with any changes in requirements made in the manual and/or identified in correspondence from the Office of Criminal The Grantee shall comply with all other requirements described in the Grantee's application and in
- Э 5 partnership with local law enforcement, prosecution, courts and victim advocacy organizations to enhance victim safety and hold offenders accountable for their crimes of violence against women. improving the criminal justice system's response to violence against women and pursue a The purpose of the program should promote a coordinated, multi-disciplinary approach to following activities will be conducted:
- ö performance as required by the Office of Criminal Justice Programs of the Department of Finance and Administration. The data collected should support the information submitted on required reports. The grantee will gather and maintain data relating to grant project activities and program The data collected should support the information submitted
- Ö data as well as community and/or collaborator outcome data on their projects to OCJP. The grantee is responsible for annual reporting of client output, outcome and satisfaction
- ဂ္ measures for their specific project type, using a standard five-point scale (Strongly Agree The Grantee will report outcome data addressing the core outcome indicators and Strongly Disagree) for all client feedback and satisfaction data

- A.6 documents included by reference shall govern in order of precedence as detailed below Incorporation of Additional Documents. In the event of a discrepancy or ambiguity regarding the Grantee's duties, responsibilities, and performance under this Grant Contract, the following
- ρ this Contract document and all of its attachments and exhibits, excluding the following items incorporated by reference;
- Ö the state grant proposal solicitation (resulting in this Grant Contract) and any associated amendments; and
- ဂ္ဂ the Grantee's Proposal attached hereto to elucidate the Grant Contract scope of services

### Ġ GRANT CONTRACT TERM:

B. 1 6/30/2012. performed within the specified period. This Grant Contract shall be effective for the period commencing on 7/1/2009 and ending The State shall have no obligation for services rendered by the Grantee which are not

### ဂ **PAYMENT TERMS AND CONDITIONS:**

- 0.1 all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be the Grantee's obligations hereunder. The Grant Budget line-items include, but are not limited to, fiscal year 11-12, shall constitute the maximum amount due the Grantee for the service and all of exceed two hundred twenty-one thousand five hundred twelve and 00/100 (\$221,512.00) incurred by the Grantee. Attachment A-1 for fiscal year 09-10, Attachment A-1 for fiscal year 10-11, and Attachment A-1 for The Grant Budget, attached and incorporated herein as a part of this Grant Contract as Maximum Liability. In no event shall the maximum liability of the State under this Grant Contract
- 0.2 are not subject to escalation for any reason unless amended, except as provided in Section C.6 Compensation Firm. unless amended. The Grant Budget amounts are firm for the duration of the Grant Contract and The maximum liability of the State is not subject to escalation for any reason
- $C_{\omega}$ C.1. Upon progress toward the completion of the work, as described in Section A of this Grant Contract, the Grantee shall submit invoices prior to any reimbursement of allowable costs. Payment Methodology. The Grantee shall be compensated for actual, reasonable, and necessary costs based upon the Grant Budget, not to exceed the maximum liability established in Section
- C.4. <u>Travel Compensation</u>. Reimbursement to the Grantee for travel, meals, or lodging shall be subject to amounts and limitations specified in the "State Comprehensive Travel Regulations," as they are amended from time to time and shall be contingent upon and limited by the Grant Budget funding for said reimbursement.
- C.5 necessary supporting documentation, Invoice Requirements. The Grantee shall invoice the State no more often than monthly, with all ਼ਰ

Maher.M.Wasef@state.tn.us 312 Rosa L. Parks Avenue Department of Finance and Administration Office of Business and Finance Nashville, TN 37243-1102

- ά correctly) detail the following required information. Each invoice shall clearly and accurately (all calculations must be extended and totaled
- $\Xi$  $\Omega$  $\Omega$  $\Omega$ Invoice/Reference Number (assigned by the Grantee)
- Invoice Period (period to which the reimbursement request is applicable);
- Grant Contract Number (assigned by the State to this Grant Contract);

- <u>ග</u> Justice Programs Account Name: Department of Finance and Administration, Office of Criminal
- 6 referenced Account Name); Account/Grantor Number (uniquely assigned by the Grantee to the above
- Grantee Name;
- ©3 referenced in this Grant Contract); Grantee Federal Employer Identification Number or Social Security Number (as
- 9 Grantee Remittance Address;
- (10) invoice questions) Grantee Contact (name, phone, and/or fax for the individual to contact with
- shall detail, at minimum, the following: Complete Itemization of Reimbursement Requested for the Invoice Period, which
- documentation and receipts as required by the above-referenced "State in accordance with and attaching to the invoice appropriate Reimbursement Amount Requested by Grant Budget Line-Item for the Comprehensive Travel Regulations"); invoice period (including any travel expenditure reimbursement requested
- ₹ # #
  - Amount Reimbursed by Grant Budget Line-Item to Date;
    Total Amount Reimbursed under the Grant Contract to Date; and
- Total Reimbursement Amount Requested (all line-items) for the invoice
- Ö Contract shall: The Grantee understands and agrees that an invoice to the State under this Grant
- $\Xi$ Contract relating to allowable reimbursements; and Section A subject to the Grant Budget and any other provision of this Grant expenditures required in the delivery of service described in Grant Contract include only reimbursement requests for actual, reasonable, and necessary
- 3 not include any reimbursement requests for future expenditures
- ဂ 으 The Grantee agrees that timeframe for reimbursement begins when the State is in receipt each invoice meeting the minimum requirements above
- Ω the State under this Grant Contract until the State has received this completed to the State shall agree to the Federal Employer Identification Number or Social Security Number referenced in this Grant Contract for the Grantee. The Grantee shall not invoice the State. The taxpayer identification number contained in the Substitute W-9 submitted The Grantee shall complete and sign a "Substitute W-9 Form" provided to the Grantee by
- 0.6 total Grant amount. amendment, and any increase in the total Grant amount shall require a contract amendment such approval shall be superseded by a subsequent revision of the Grant Budget by contract approval of the State in which the terms of the approved revisions are explicitly set forth. Any funding for a line-item that was previously funded at zero dollars (\$0.00) and do not increase the letter, giving full details supporting such request, provided that such revisions do not result in adhere to the Grant Budget. The Grantee may request revisions of Grant Budget line-items by Budget Line-items. Expenditures, reimbursements, and payments under this Grant Contract shall Grant Budget line-item revisions may not be made without prior, written
- C.7. form and substance acceptable to the State <u>Disbursement Reconciliation and Close Out.</u> The Grantee shall submit a final invoice and grant disbursement reconciliation report within forty-five (45) days of the Grant Contract end date and in
- disbursement reconciliation report shall detail all Grantee expenditures recorded to meet said requirement The Grant Budget specifies a Grantee Match Requirement and the final grant

- No Grantee expenditure shall be recorded and reported toward meeting a Grantee Match Requirement of more than one grant contract with the state of
- =: amount that the Grantee failed to contribute to the Total Project as budgeted. detailed by the Grant Budget column "Grant Contract," shall be reduced by the amount of any Grantee failure to meet a Match Requirement, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as The final grant disbursement reconciliation report shall specifically detail the exact
- σ disbursement reconciliation report. the difference to the State. The Grantee shall submit said refund with the final grant permitted by the Section C, Payment Terms and Conditions of this Grant Contract (including any adjustment pursuant to section C.7.a.ii. above), the Grantee shall refund If total disbursements by the State pursuant to this Grant Contract exceed the amounts
- ဂ္ဂ after the final invoice and grant disbursement reconciliation report. The State will not deem any Grantee costs submitted for reimbursement after the final invoice to be allowable and reimbursable by the State, and such invoices will NOT be paid. The State shall not be responsible for the payment of any invoice submitted to the state
- ō state as required shall result in the Grantee being deemed ineligible for reimbursement under this Grant Contract, and the Grantee shall be required to refund any and all payments by the state pursuant to this Grant Contract. The Grantee's failure to provide a final grant disbursement reconciliation report to the
- Φ The Grantee must close out its accounting records at the end of the grant period in such a way that reimbursable expenditures and revenue collections are NOT carried forward.
- C.8 Grantee agrees to remit any overpayment of funds to the State, and subject to the availability of funds the State agrees to remit any underpayment to the Grantee. treatment consistently and may not change during the grant period. Any changes in the approved indirect cost rate must have prior approval of the cognizant federal agency and the State. If the indirect cost rate is provisional during the term of this agreement, once the rate becomes final, the Grantee makes an election and treats a given cost as direct or indirect, it must apply that submit to the State a copy of the indirect cost rate approved by the cognizant federal agency and indirect cost rate to amounts and limitations specified in the attached Grant Budget. Once the The Grantee will be reimbursed for indirect cost in accordance with the approved Should the Grantee request reimbursement for indirect cost, the Grantee must
- C.9. Contract period Statement 03 or any amendments or revisions made to this policy statement during the Grant reported in accordance with the provisions of Department of Finance and Administration Policy involving allocation to more than one program or activity, such costs shall be allocated and Cost Allocation. If any part of the costs to be reimbursed under this Grant Contract are joint costs
- C.10. Payment of Invoice. The payment of the invoice by the State shall not prejudice the State's right to object to or question any invoice or matter in relation thereto. Such payment by the State shall of any of the costs invoiced therein. neither be construed as acceptance of any part of the work or service provided nor as an approva
- C.11. audits or monitoring conducted in accordance with the terms of this Grant Contract, not to any invoice or payment theretofore made which are determined by the State, on the basis of constitute allowable costs Unallowable Costs. The Grantee's invoice shall be subject to reduction for amounts included
- C.12 by the Grantee and payable to the Grantee under this or any Contract between the Grantee and the State of Tennessee any amounts which are or shall become due and payable to the State of Tennessee The State reserves the right to deduct from amounts which are or shall become due

C.13. until the Grantee has completed this form and submitted it to the State Grantee, under this or any other contract the Grantee has with the State of Tennessee shall be made by Automated Clearing House (ACH). The Grantee shall not invoice the State for services Once this form has been completed and submitted to the State by the Grantee all payments to the <u>Automatic Deposits</u>. The Grantee shall complete and sign an "Authorization Agreement for Automatic Deposit (ACH Credits) Form." This form shall be provided to the Grantee by the State.

# D. STANDARD TERMS AND CONDITIONS:

- D.1. appropriate State officials in accordance with applicable Tennessee State laws and regulations Required Approvals. The State is not bound by this Grant Contract until it is approved by the
- D.2 accordance with applicable Tennessee State laws and regulations. executed by all parties hereto and approved by the appropriate Tennessee State officials in Modification and Amendment. This Grant Contract may be modified only by a written amendment
- D.3 for which the State is liable, shall be determined by the State. Should the State exercise this provision, the Grantee shall not have any right to any actual general, special, incidental, consequential, or any other damages whatsoever of any description or amount. completed as of the termination date, but in no event shall the State be liable to the Grantee for give the Grantee at least thirty (30) days written notice before the effective termination date. Th Grantee shall be entitled to compensation for authorized expenditures and satisfactory services compensation for any service which has not been rendered. The final decision as to the amount, Termination for Convenience. Said termination shall not be deemed a Breach of Contract by the State. The State shall The State may terminate this Grant Contract without cause for any The
- D.4 Grant Contract by the Grantee in excess of fair compensation for completed services. Notwithstanding the above, the Grantee shall not be relieved of liability to the State for damages sustained by virtue of any breach of this the State shall have the right to immediately terminate the Grant Contract and withhold payments Termination for Cause. If the Grantee fails to properly perform its obligations under this Grant Contract in a timely or proper manner, or if the Grantee violates any terms of this Grant Contract,
- D.5 approval of the State. If such subcontracts are approved by the State, they shall contain, at a minimum, sections of this Grant Contract below pertaining to "Conflicts of Interest," "Lobbying," "Nondiscrimination," "Public Accountability," "Public Notice," and "Records" (as identified by the section headings). Notwithstanding any use of approved subcontractors, the Grantee shall be the prime contractor and shall be responsible for all work performed any of the services performed under this Grant Contract without obtaining the prior written Subcontracting. The Grantee shall not assign this Grant Contract or enter into a subcontract for
- D.6. or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Conflicts of Interest. The Grantee warrants that no part of the total Grant Amount shall be paid directly or indirectly to an employee or official of the State of Tennessee as wages, compensation, Grantee in connection with any work contemplated or performed relative to this Grant Contract.
- D.7. Lobbying. The Grantee certifies, to the best of its knowledge and belief, that:
- ģ or modification of any federal contract, grant, loan, or cooperative agreement. an employee of a Member of Congress in connection with the awarding of any Federal employee of an agency, a Member of Congress, an officer or employee of Congress, or into of any cooperative agreement, and the extension, continuation, renewal, amendment, contract, the making of any Federal grant, the making of any federal loan, the entering undersigned, to any person for influencing or attempting to influence an officer or No federally appropriated funds have been paid or will be paid, by or on behalf of the
- Ö of Congress in connection with this contract, grant, loan, or cooperative agreement, the Grantee shall complete and submit Standard Form-LLL, "Disclosure Form to Report Member of Congress, an officer or employee of Congress, or an employee of a Member person for influencing or attempting to influence an officer or employee of any agency, a Lobbying," in accordance with its instructions If any funds other than federally appropriated funds have been paid or will be paid to any

ဂ shall certify and disclose accordingly. contracts under grants, loans, and cooperative agreements) and that all subrecipients The Grantee shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and

transaction was made or entered into and is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, *U.S. Code*. This certification is a material representation of fact upon which reliance was placed when this

- D.8. grounds of disability, age, race, color, religion, sex, national origin, or any other classification protected by Federal, Tennessee State constitutional, or statutory law. The Grantee shall, upon all employees and applicants, notices of nondiscrimination. request, show proof of such nondiscrimination and shall post in conspicuous places, available to the performance of this Grant Contract or in the employment practices of the Grantee on the Nondiscrimination. The Grantee hereby agrees, warrants, and assures that no person shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in
- D.9. receive Grant supported services, a sign at least twelve inches (12") in height and eighteen inches may present grievances about the operation of the service program, and the Grantee shall display in a prominent place, located near the passageway through which the public enters in order to behalf of the State, the Grantee agrees to establish a system through which recipients of services Public Accountability. If the Grantee is subject to Tennessee Code Annotated, Title 8, Chapter 4, (18") in width stating: Part 4 or if this Grant Contract involves the provision of services to citizens by the Grantee on

NOTICE: THIS AGENCY IS A RECIPIENT OF TAXPAYER FUNDING. IF YOU OBSERVE AN AGENCY DIRECTOR OR EMPLOYEE ENGAGING IN ANY ACTIVITY WHICH YOU CONSIDER TO BE ILLEGAL, IMPROPER, OR WASTEFUL, PLEASE CALL THE STATE COMPTROLLER'S TOLL-FREE HOTLINE: 1-800-232-5454

- D. 10. of Criminal Justice Programs." Any such notices by the Grantee shall be approved by the State project is funded under an agreement with the Department of Finance and Administration, Office <u>Public Notice</u>. All notices, informational pamphlets, press releases, research reports, signs, and similar public notices prepared and released by the Grantee shall include the statement, "This
- D.11. <u>Licensure</u>. The Grantee and its employees and all sub-grantees shall be licensed pursuant to all applicable federal, state, and local laws, ordinances, rules, and regulations and shall upon request provide proof of all licenses.
- D.12 not-for-profit entities shall be maintained in accordance with the *Accounting Manual for the Recipients of Grant Funds in the State of Tennessee*, published by the Tennessee Comptroller of the Treasury (available at http://comptroller.state.tn.us/ma/nonprofit/nonprofit1.pdf). The financial statements shall be prepared in accordance with generally accepted accounting principles and shall be subject to audit at any reasonable time and upon reasonable notice by the state agency, the Comptroller of the Treasury, or their duly appointed representatives. The records of Contract, shall be maintained for a period of three (3) full years from the date of the final payment approved subcontractor), insofar as they relate to work performed or money received under this <u>Records</u>. The Grantee (and any approved subcontractor) shall maintain documentation for all charges under this Contract. The books, records, and documents of the Grantee (and any
- D.13 Monitoring. The Grantee's activities conducted and records maintained pursuant to this Grant Contract shall be subject to monitoring and evaluation by the State, the Comptroller of the Treasury, or their duly appointed representatives.
- D.14 Progress Reports. The Grantee shall submit brief, periodic, progress reports to the State as
- D.15 Annual Report and Audit. The Grantee shall prepare and submit, within nine (9) months after the close of the reporting period, an annual report of its activities funded under this Grant Contract to the commissioner or head of the Granting agency, the Tennessee Comptroller of the Treasury,

shall be made available to the public. be provided to the designated cognizant state agency, the State Granting Department, the Tennessee Comptroller of the Treasury, and the Department of Finance and Administration and to such fees contained in the prescribed contract form noted above. Copies of such audits shall licensed independent public accountant by the Grantee shall be subject to the provisions relating prepared by the Tennessee Comptroller of the Treasury, and payment of fees for the audit prepared by the licensed independent public accountant. Payment of the audit fees of the the Treasury. The Grantee shall be responsible for reimbursement of the cost of the audit Governmental Units and Recipients of Grant Funds published by the Tennessee Comptroller of standards, the provisions of OMB Circular A-133, if applicable, and the Audit Manual for Any such audit shall be performed in accordance with generally accepted government auditing accountant shall be on a contract form prescribed by the Tennessee Comptroller of the Treasury. receives five hundred thousand dollars (\$500,000) or more in aggregate federal and state funding for all its programs shall include audited financial statements. All books of account and financial and the Commissioner of Finance and Administration. The annual report for any Grantee that the prior approval of the Comptroller, engage a licensed independent public accountant to perform Comptroller's duly appointed representative. records shall be subject to annual audit by the Tennessee Comptroller of the Treasury or the The audit contract between the Grantee and the licensed independent public When an audit is required, the Grantee may, with

D.16. such decision and non-competitive procurement. Further, if such reimbursement is to be made federal procurement requirements. governed by and reimbursement shall be subject to the Grantee's compliance with applicable with funds derived wholly or partially from federal sources, the determination of cost shall be is paid pursuant to this Grant Contract. In each instance where it is determined that use of a competitive procurement method was not practical, said documentation shall include a written materials, supplies, equipment, and/or contracted services, such procurement shall be made on a justification, approved by the Commissioner of the Department of Finance and Administration, for Grantee shall maintain documentation for the basis of each procurement for which reimbursement competitive basis, including the use of competitive bidding procedures, where practical. The Procurement. If the other terms of this Grant Contract allow reimbursement for the cost of goods,

Grantee shall obtain prior approval from the State before purchasing any equipment under Grant Contract.

- D.17. agreement shall not be construed as a waiver or relinquishment of any such term, covenant, condition, or provision. No term or condition of this Grant Contract shall be held to be waived modified, or deleted except by a written amendment signed by the parties hereto. upon the strict performance of any of the terms, covenants, conditions, or provisions of this Strict Performance. Failure by any party to this Grant Contract to insist in any one or more cases
- D.18 act as employees, partners, joint ventures, or associates of one another. It is expressly acknowledged by the parties hereto that such parties are independent contracting entities and that nothing in this Grant Contract shall be construed to create a principal/agent relationship or to allow deemed or construed to be the employees or agents of the other party for any purpose business affairs or provides its usual services. The employees or agents of one party shall not be either to exercise control or direction over the manner or method by which the other transacts its Independent Contractor. The parties hereto, in the performance of this Grant Contract, shall not

authorization of the General Assembly. enforceable because it appropriates public money and nullifies governmental immunity without the political entity to indemnify or hold harmless the State beyond the liability imposed by law is seq., for causes of action sounding in tort. Further, no contract provision requiring a Tennessee Tennessee Government Tort Liability Act, Tennessee Code Annotated, Sections 29-20-101 et The Grantee, being a political subdivision of the State, is governed by the provisions of the

D.19. State Liability. The State shall have no liability except as specifically provided in this Grant Contract.

- D.20. but not limited to, acts of God, natural disasters, riots, wars, epidemics or any other similar cause. Force Majeure. The obligations of the parties to this Grant Contract are subject to prevention by causes beyond the parties' control that could not be avoided by the exercise of due care including
- D.21. State and Federal Compliance. The Grantee shall comply with all applicable state and federal laws and regulations in the performance of this Grant Contract. State and Federal Compliance.
- D.22. Sections 9-8-101 through 9-8-407. and limited to those rights and remedies, if any, available under Tennessee Code Annotated, Contract. The Grantee acknowledges and agrees that any rights or claims against the State of Tennessee or its employees hereunder, and any remedies arising there from, shall be subject to jurisdiction of the courts of the State of Tennessee in actions that may arise under this Grant laws of the State of Tennessee. The Grantee agrees that it will be subject to the exclusive This Grant Contract shall be governed by and construed in accordance with the
- D.23. representations, negotiations, and agreements between the parties relating hereto, whether the parties relating to the subject matter contained herein, including all the terms and conditions of the parties' agreement. This Grant Contract supersedes any and all prior understandings, written or oral. Completeness. This Grant Contract is complete and contains the entire understanding between
- D.24. <u>Severability</u>. If any terms and conditions of this Grant Contract are held to be invalid or unenforceable as a matter of law, the other terms and conditions hereof shall not be affected thereby and shall remain in full force and effect. To this end, the terms and conditions of this Grant Contract are declared severable.
- D.25. Headings. **Grant Contract** Section headings are for reference purposes only and shall not be construed as part of

# E. SPECIAL TERMS AND CONDITIONS:

- <u>П</u> any other terms and conditions of this Grant Contract, these special terms and conditions shall Conflicting Terms and Conditions. Should any of these special terms and conditions conflict with
- Ш N by written notice addressed to the respective party at the appropriate mailing address, facsimile number, or EMAIL address as set forth below or to that of such other party or address, as may be hereafter specified confirmation. courier service with an asset tracking system, or by EMAIL or facsimile transmission with recipient made by certified, first class mail, return receipt requested and postage prepaid, by overnight Communications and Contacts. All instructions, notices, consents, demands, or other communications required or contemplated by this Grant Contract shall be in writing and shall be Any such communications, regardless of method of transmission, shall be

The State

Terry Hardin, Grant Manager
Department of Finance and Administration
Office of Criminal Justice Programs
312 Rosa L. Parks Avenue
Suite 1200
Nashville, TN 37243-1102
Teryl.Hardin@tn.gov
Telephone # 615-532-3355
FAX # 615-532-2989

The Grantee:

Roger Henderson, Grant Coordinator Shelby County Sheriff's Office

201 Poplar Avenue, Suite 9-26 Memphis, TN 38103 Roger.Henderson@shelby-sheriff.org Telephone # (901) 545-5591 FAX # (901) 545-3393

effectively given upon receipt or recipient confirmation as may be required All instructions, notices, consents, demands, or other communications shall be considered

- Ш ω such an event occur, the Grantee shall be entitled to compensation for all satisfactory and authorized services completed as of the termination date. Upon such termination, the Grantee shall have no right to recover from the State any actual, general, special, incidental, of the written notice, the Grantee shall cease all work associated with the Grant Contract. Subject to Funds Availability. consequential, or any other damages whatsoever of any description or amount. unavailable, the State reserves the right to terminate the Grant Contract upon written notice to the State and/or Federal funds. Said termination shall not be deemed a breach of Contract by the State. Upon receipt In the Grant Contract is subject to the appropriation and availability of In the event that the funds are not appropriated or are otherwise
- т 4. received a State of Tennessee Voluntary Buyout Program (VBP) severance payment with regard to contracts with state agencies that participated in the VBP. Voluntary Buyout Program. The Grantee acknowledges and understands that, for a period years beginning August 16, 2008, restrictions are imposed on former state employees who The Grantee acknowledges and understands that, for a period of two
- severance payment or the spouse of such an individual holds a controlling financial severance payment or an entity in which a former state employee who received a VBP The State will not contract with either a former state employee who received a VBP
- O VBP severance payment as an employee or an independent contractor of a State grantee would not be appropriate, and in such cases the State may refuse Grantee personnel. Inasmuch, it shall be the responsibility of the State to review Grantee personnel to identify any such issues. circumstances under which a return to work by a former state employee who received a the foregoing, the Grantee understands and agrees that there may be unique business VBP severance payment is an employee or an independent contractor. Notwithstanding The State may contract with an entity with which a former state employee who received a
- O agency that is a Party to this Grant Contract, the Commissioner of Finance and determination on such a request shall be at the sole discretion of the head of the state for a waiver of the VBP restrictions regarding a former state employee and a contract with a state agency that participated in the VBP. Any such request must be submitted to the State in the form of the VBP Contracting Restriction Waiver Request format available With reference to either subsection a. or b. above, a grantee may submit a written request Administration, and the Commissioner of Human Resources from the State and the Internet at: www.state.tn.us/finance/rds/ocr/waiver.html. The
- i E than one year and an acquisition cost which equals or exceeds \$5,000.00. defined as an article of nonexpendable, tangible, personal property having a useful life of more under this Grant Contract, subject to the State's equitable interest therein, to the extent of its pro vehicles, hereinafter referred to as "equipment," rata share, based upon the State's contribution to the purchase price. "Equipment" shall be State Interest in Equipment. The Grantee shall take legal title to all equipment and to all motor purchased totally or in part with funds provided

create and acknowledge a security interest in favor of the State in the equipment and/or motor vehicles acquired by the Grantee pursuant to the provisions of this Grant document. A further Secured Transaction, found at Title 47, Chapter 9 of the *Tennessee Code Annotated*, and the provisions of the Tennessee Motor Vehicle Title and Registration Law, found at Title 55, Chapter 1 As authorized by the provisions of the terms of the Tennessee Uniform Commercial Code Tennessee Code Annotated, an intent of this Grant document and the parties hereto is to

State in the equipment or motor vehicles acquired by the Grantee pursuant to the provisions of this program's prior year Grants between the State and the Grantee. intent of this Grant document is to acknowledge and continue the security interest in favor of the

option, may also invoke the remedies herein provided including the covenants to pay when due all sums secured by this Grant Contract, the State shall pay all costs of filing such financing statements and any extensions, renewals, amendments and have the remedies of a secured party under the Uniform Commercial Code and, at the State's Upon the Grantee's breach of any covenant or agreement contained in this Grant Contract, Code any other security interest in said equipment, including replacements and additions thereto State, the Grantee shall not create or suffer to be created pursuant to the Uniform Commercial financing statements the State may reasonably require. Without the prior written consent of the State may require to perfect a security interest with respect to said equipment. deliver to the State, upon the State's request, any financing statements, as well as extensions, renewals, and amendments thereof, and reproduction of this Grant Contract in such form as the shall be sufficient as a financing statement. In addition, the Grantee agrees to execute and releases thereot, and shall pay all reasonable costs and expenses of any record searches for herein specified. Any reproduction of this or any other security agreement or financing statement reproduction thereof, in any appropriate office, as a financing statement for any of the equipment pursuant to the Uniform Commercial Code, and the Grantee hereby grants the State a security interest in said equipment. The Grantee agrees that the State may file this Grant Contract or a equipment herein specified which, under applicable law, may be subject to a security interest intended to be a security agreement pursuant to the Uniform Commercial Code for any of the The Grantee hereto grants the State a security interest in said equipment. This agreement is The Grantee shall

include, at a minimum, the following: provided under this Grant Contract and shall submit an inventory control report which must The Grantee shall maintain a perpetual inventory system for all equipment purchased with funds inventory of all property purchased totally or in part with funds provided under this Grant Contract. The Grantee agrees to be responsible for the accountability, maintenance, management, and

- Description of the equipment;
- Ö Manufacturer's serial number or other identification number, when applicable
- ည္ဂ Consecutive inventory equipment tag identification;
- Acquisition date, cost, and check number;
- Φ Fund source, State grant number, or other applicable fund source identification:
- Percentage of state funds applied to the purchase;
- Location within the Grantee's operations where the equipment is used; Condition of the property or disposition date if Grantee no longer has possession;
- Depreciation method, if applicable; and
- Monthly depreciation amount, if applicable.

equipment item on the inventory control report. The Grantee shall inventory equipment annually. investigate any differences. The Grantee must then adjust the inventory control report to reflect The Grantee must compare the results of the inventory with the inventory control report and The Grantee shall tag equipment with an identification number which is cross referenced to the results of the physical inventory and subsequent investigation.

at the time of loss based upon the State's original contribution to the purchase price stolen, the Grantee shall be responsible to the State for the pro rata amount of the residual value any equipment loss describing reason(s) for the loss. Should the equipment be destroyed, lost, or through this grant within thirty (30) days of the Grant Contract end date and in form and substance acceptable to the State. This inventory control report shall contain, at a minimum, the requirements specified above for inventory control. The Grantee shall notify the State, in writing, of The Grantee shall submit its inventory control report of all equipment purchased with funding

approval from the State for any proposed disposition of equipment purchased with Grant funds All equipment shall be disposed of in such a manner as parties may agree from among into, or at another time during the term of the Grant Contract, the Grantee shall request written Upon termination of the Grant Contract, where a further contractual relationship is not entered

accordance with any applicable federal laws or regulations. alternatives approved by Tennessee Department of General Services as appropriate and in

Щ. 6. Grantee to safeguard the confidentiality of such material or information in conformance with State law and ethical standards. and ethical standards and shall not be disclosed, and all necessary steps shall be taken by the State shall be regarded as confidential information in accordance with the provisions of State law communication, provided to the Grantee by the State or acquired by the Grantee on behalf of the accordance with the law. Confidentiality of Records. Strict standards of confidentiality of records shall be maintained in All material and information, regardless of form, medium or method of

violate the applicable provisions of the first paragraph of this section. same level of care to preserve the confidentiality of the State's information as the Grantee exercises to protect its own confidential information so long as such standard of care does not The Grantee will be deemed to have satisfied its obligations under this section by exercising the

The Grantee's obligations under this section do not apply to information in the public domain; entering the public domain but not from a breach by the Grantee of this Grant Contract; previously the use of the State's information; or, disclosed by the State to others without restrictions against possessed by the Grantee without written obligations to the State to protect it; acquired by the Grantee without written restrictions against disclosure from a third party which, to the Grantee's knowledge, is free to disclose the information; independently developed by the Grantee without

It is expressly understood and agreed the obligations set forth in this section shall survive the termination of this Grant Contract.

IN WITNESS WHEREOF:

**Shelby County Government:** 

May 27, 2019

GRANTEE SIGNATURE

A C Wharton, Mayor

PRINTED NAME AND TITLE OF GRANTEE SIGNATORY (above)

Department of Finance and Administration:

# Attachment "A"

**Application No.: 1685 Application Title:** Shelby County Sheriff Stop Grant

7:37:01 AM Create Date: 4/30/2009

2009/2010 Application for Funding

Status: Submitted

Application Type: STOP

User ID:

Submit Date: 5/1/2009 1:38:19

# A separate application with budget forms must be submitted for each grant.

## **Authorizing Agency**

CEV CEV Street Address 2 Street Address **Authorizing Agency** Memphis 160 North Main Street, Suite 850 Shelby County Government

38103

State

Internet Address Zip Code http://www.shelbycountytn.gov

# Implementing Agency

Internet Address SubContractor (if applicable) Implementing Agency http://www.shelby-sheriff.org/ Shelby County Sheriff's Office

Beginning Date Project Title Federal Purpose Area OCJP Program Title Shelby County Sheriff's Office Stop Grant 7/1/2009 Develop, train, or expand specialized units

**Ending Date** 6/30/2012

Federal ID # of Applicant

62-6000841

Back

### Authorized Official

Street Address Authorized Official Name Mayor 160 North Main, Suite 850 A C Wharton

CIty Street Address 2

Memphis

State Zip Code

38103

901-545-4500

Phone

Email Fax ACWharton@shelbycountytn.gov 901-545-4759

### Project Director

Street Address Project Director Name Title

> Roger Henderson Grant Coordinator

201 Poplar Avenue, Suite 9-26

Memphis

Street Address Ν

State S Zip Code

Phone

(901) 545-5591 38103

Fax Email

(901) 545-3393 Roger.Henderson@shelby-sheriff.org

Back

**Financial Director** 

Title Street Address Financial Director Name

201 Poplar Avenue, Suite 9-05

Chief Administrative Officer

Harvey Kennedy

CHY Street Address 2

Fax

Email

State Zip Code Phone

Memphis

38103 (901) 545-5505 Harvey.Kennedy@shelby-sheriff.org

County or counties in which project will operate 909,062 Shelby County

Total Population
Age Group of Target Population
(if applicable)
US Congressional District(s)

List all federal and state grants currently received by your agency:

The second second second by John agency.	currently received	by your age	ency:
Source	Grant Number	Amount	Purpose
U. S. Dept. of Justice, Office of Violence Against Women	OVW-2008-1731	254046.00	To serve civil orders of protection
Tennessee Department of Finance and Administration Z	Z-06027530-00	300000.00	Supplies 2 School Resource Officers
U. S. Dept. of Justice, Office of Community Oriented Policing	2007CKWX0184	955992.00	Provides school radio equipment for county
U.S. Dept. of Justice, Office of Violence Against Women 2	2006EWAXK010	16500.00	Provides elder abuse training for Law Enforcement
U. S. Dept. of Homeland Security, Tennessee Emergency Management Agency	341.08-491-08	576000.00	To harden targets along the Mississippi River
U. S. Dept. of Justice, Edward Byrne Memorial Justice Assistance Grant	1121-0264	126304.00	Providing staff for a Jail Mental Health Program
U. S. Dept. of Justice, Edward Byrne Memorial Justice Assistance Grant	1121-0264	16609.00	Second part of the Jail Mental Health Program
U. S. Dept. of Justice 2	2008-DD-BX-0282	502328.00	Supplies overtime and computer equipment for Data Smart Policing
U.S. Dept. of Justice, Targeting Violent Crime 0 Initiative	000	695980.00	Supplies vehicles and overtime for directed patrols in "hot spot" areas
U. S. Dept. of Justice, A Bureau of Justice Assistance 1:	ADL4274- 12182008-1130	27935.00	Bullet Proof Vests
Governor's Highway Safety P	PT-09-144	152073.00	Provides overtime and equipment to traffic division for enforcement duties

Governor's Highway Safety PT-09-143	PT-09-143 /		Provides overtime for
Office	154AL-09-111	19970.00	deputy to coordinate West Tennessee initiatives
Governor's Highway Safety Office	154AL-09-110	142957.00	142957.00 Assists in supplying DUI enforcement
Governor's Highway Safety OP-09-03 / K3- Office 09-02	OP-09-03 / K3- 09-02	315663.00	Funds the West 315663.00 Tennessee Child Passenger Seat Center

Back

#### Attachment A - Project Narrative

Application Title: Shelby County Sheriff Stop Grant Application No.: 1685 Create Date: 4/30/2009 7:37:01 AM

Status: Submitted

Application Type: STOP

User ID:

**Submit Date:** 5/1/2009 1:38:19 PM

### I. PURPOSE - 25%

# Problem / Needs Statement (10%)

include Vandalism, Harassing Phone Calls, Simple Assault, Intimidation, and Aggravated Assault. The Shelby County Sheriff's Office is able to allocate one supervising Lieutenant providing part-time support, one full-time Sergeant, and two part time Deputies to an increasing case load of Domestic Violence complaints. This application seeks to provide a solution for an understaffed Domestic Violence unit by supplying an additional full-time deputy to work Domestic Violence related cases. Interviews with law enforcement professionals reflect the single most influential factor of domestic violence in society is the continuation of a generational cycle of abuse and/or a history of abuse in the family of origin. Children who grow up in an environment where control is maintained through the state of the sta Data reported from the Shelby County Sheriff's Office yield 242 domestic violence reports were filed January 1, 2009 to March 31, 2009 in the unincorporated Shelby County area. Additionally, 183 (or 76%) of these cases involved subjects known to be intimate at some point in time. These reports experience loss of physical health and/or wage-earning power. the same methods of abuse as adults. Domestic violence is more frequent where individuals intimidating verbal threats and conflicts escalate into physical violence, are more likely to resort to

#### Goals (15%)

Which Federal STOP Goal(s) will this project be addressing (check all that apply) Please include only those goals that this project will actually address:

## Hold offenders accountable

The primary activities this grant will accomplish involve strengthening an existing enforcement program whereby one additional officer will focus exclusively on cases involving domestic violence, sexual assault, and stalking. Utilizing an additional full time officer will allow the Shelby County community presence, and provide a more timely response to clearing outstanding cases Sheriff's Office to increase the quality of investigations, increase an anti-Domestic Violence

### II. INPUTS - 10%

#### Staffing

exclusively pertaining to domestic violence, sexual assault and stalking. The Shelby County Sheriff's Office requests funding for one full-time officer to work on cases

Maintains records and prepares reports. Frequently communicates with other federal, state or local Brief Description of Duties: Must be proficient in areas of criminal research. Makes physical arrests law enforcement agencies, Works extended or unusual hours on a routine basis

Minimum acceptable qualifications:

- twelve (12) months in a present assignment.

  2. Successful completion of probationary period and successful completion of Basic recruit training. 1. Applicant must have a minimum of three (3) years of law enforcement experience, including

- Policy. Must have successfully completed and qualified in all phases of In-Service Training.

  Applicant's disciplinary record will be reviewed for consideration for selection.

  Applicant must have a satisfactory record under the Shelby County Sheriff's Office Sick Leave
- 6. Applicant must have a current satisfactory performance review.
  7. Successful applicant will serve a six (6) months evaluation period. This Evaluation will be for the performance of the job in question. Applicant will either be certified or moved for cause. After
- include: performance, the ability to perform a minimum of required tasks in investigative work. certification, the successful applicant will be evaluated on an annual basis.

  8. Each applicant will be evaluated to determine if the applicant has demonstrated by past These tasks
- a. Preserve, process, and present physical evidence.
- b. Conduct lineups in accordance with legal requirements
- topical order. c. The ability to obtain statements (witnesses and defendants) which are clear, precise, and in
- The ability to develop and manage confidential informants
- chronological order. e. The ability to execute arrest reports and other documents which are clear, precise and in

#### III. ACTIVITIES 15%

### Program Activities:

supplying a full-time deputy to only work Domestic Violence related cases. This new position will be responsible for investigating domestic violence related crimes as defined by the grantor and collect required data for annual reports This application seeks to provide a solution to the need of an understaffed Domestic Violence unit by

## **Collaboration Activities:**

such as the Shelby County Victim Assistance Center, Anna Whaley (901) 545-4357 and the District Attorney General's Office, Karen Cook 901-545-5900. Additionally, this office participates in joint collaborations such as Operation Safe Community. Operation Safe Community is a collaborative Expanding the SCSO's personnel to address Domestic violence will help drive this initiative effort involving multi-faceted partnerships throughout the community aimed at reducing crime. Specifically one of the tasks of this effort is to implement a coordinated domestic violence initiative. to victims of domestic abuse. The Shelby County Sheriff's Office collaborates with other agencies This office collaborates with other community agencies to insure the best possible services available

#### IV. OBJECTIVES 30%

# Intended Outputs (10%)

For all <u>court</u>, <u>law enforcement</u>, <u>prosecution</u>, and <u>victim services</u> projects serving clients/victims, project how many clients/victims will be served by this project during the first year of this grant:

For all projects serving clients/victims, project <u>how many clients/victims</u> will receive the following services during the first year of this grant:

### Victim Service Projects

Crisis Intervention

Forensic Exam

Hospital/Clinic

Counseling / Support Group

Criminal Justice Advocacy

Civil Legal Advocacy

Civil Legal Assistance (paralegal and atty.)

Interpretation/Translation

Victim / Survivor Advocacy

**Emergency Shelter** 

Transportation

Order of Protection Assistance

# Law Enforcement Projects

Calls for Assistance

720

Referrals to Gov't Victim Services<sup>1</sup>

Referrals to Non-gov't Victim Services<sup>2</sup>

270

438

#### Prosecution

Order of Protection Assistance<sup>3</sup>

Cases investigated

446

Number of Cases for Prosecution

Referrals to Non-gov't Victim
Services<sup>2</sup>

Referrals to Gov't Victim Services1

Order of Protection Assistance<sup>3</sup>

#### Court

Number of Criminal Cases Filed

Referrals to Gov't Victim Services1

Referrals to Non-gov't Victim
Services<sup>2</sup>

Order of Protection Assistance<sup>3</sup>

#### Training

Number of training events during the first year of the grant

Number of persons trained during the first year of the grant

ω

ω

stalking. employed by criminal justice agencies, such as law enforcement, prosecution, courts, or probation that are targeted to victims/survivors of domestic violence, dating violence, sexual assault, and/or <sup>1</sup>Governmental refers to victim services provided by victim-witness specialists or victim assistants

Non-governmental refers to services provided by non-profit community-based agencies victims/survivors of domestic violence, dating violence, sexual assault, and/or stalking.
 Assistance provided by STOP staff to a victim/survivor for a temporary or final order of

of protection.

### Ø Intended Outcomes (20%)

Which **Core Outcome** will your project use to describe the results of the services being provided by your project (choose one):

Law Enforcement DV Units

## V. DATA COLLECTION PROCEDURES -20%

# **Demographic and Output Reports:**

maintained during the course of the investigation. Demographic data will include a case identifier, the age, sex, and race of both the defendant(s) and the victim(s), street address and zipcode of the Demographic and output data will be collected and reported utilizing a simple Excel spreadsheet location of the reported incident and defendants initial charge

### **Outcome Reports:**

**Core Victim Outcome Indicators:** Victims report that they feel safe, secure, and protected. **Required Victim Outcome Measures:** I feel safer now because of the services that I received. Describe when, how, and by whom this data will be measured:

conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five. The above measurement will be recorded by the investigating officer at least 14 days after the

offenders accountable. Core Victim Outcome Indicators: Victims report that they believe the system works to hold

make sure offenders 'pay' for their crimes.

Describe when, how, and by whom this data will be measured: Required Victim Outcome Measures: I am confident that law enforcement does

The above measurement will be recorded by the investigating officer at least 14 days after the conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five

**Core Victim Outcome Indicators:** Victims report that they have knowledge they didn't have

have before. Required Victim Outcome Measures: I have knowledge about how to remain safe that I did not

Describe when, how, and by whom this data will be measured:

The above measurement will be recorded by the investigating officer at least 14 days after the conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five.

Core Victim Outcome Indicators: Victims report that they have knowledge they didn't have

criminal justice system (e.g. my rights as a victim, calling police, removing the offender, pressing charges, obtaining a restraining order). Required Victim Outcome Measures: I am more knowledgeable about victim services and the

Describe when, how, and by whom this data will be measured

conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five. The above measurement will be recorded by the investigating officer at least 14 days after the

community resources. Required Victim Outcome Measures: This **Core Victim Outcome Indicators:** Victims know how to access available resources agency helped me learn how to access benefits or

Describe when, how, and by whom this data will be measured:

conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five. The above measurement will be recorded by the investigating officer at least 14 days after the

calling back themselves. Core Victim Outcome Indicators: Victims endorse agency by recommending it to others, or

needs like mine. **Required Victim Outcome Measures:** I would recommend this program to others who have

Describe when, how, and by whom this data will be measured:

The above measurement will be recorded by the investigating officer at least 14 days after the conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five.

**Core Victim Outcome Indicators:** Victims express satisfaction with services.

Required Victim Outcome Measures: I am satisfied with the services I received through this

Describe when, how, and by whom this data will be measured:

The above measurement will be recorded by the investigating officer at least 14 days after the conclusion of the incident. The officer will contact the victim and conduct either a face to face interview or a telephone interview asking the victim to rank the statement on a scale of one to five.

Core Collaboration Outcome Indicators: Shelters, law enforcement, legal services, health care, schools, prosecutors and other community agencies report improved working relationships with the agency on victim services matters.

Required Collaboration Outcome Measures: This agency has worked collaboratively with our

agency during the current fiscal year to improve the condition of victims in our community. Describe when, how, and by whom this data will be measured:

The officer will maintain a list of partering agencies and before the end of the year ask them to

complete a confidential, two question survey.

DV unit's response to victims of DV and sexual assault. schools, prosecutors and other community agencies express satisfaction with the law enforcement Core Collaboration Outcome Indicators: Shelters, law enforcement, legal services, health care,

violence unit's response to victims of domestic violence and sexual assault. Required Collaboration Outcome Measures: I am satisfied with this law enforcement domestic

Describe when, how, and by whom this data will be measured:

complete a confidential, two question survey The officer will maintain a list of partering agencies and before the end of the year ask them to

period beginning 7/1/2009, and ending 6/30/2010. APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the

\$104,544.00	\$26,136.00	\$78,408.00	GRAND TOTAL	25
0.00	0.00	0.00	Grantee Match Requirement (for any amount of the required Grantee Match that is <u>not</u> specifically delineated by other budget line-items)	N/A
0.00	\$24,736.00	NA	In-Kind Expense	24
0.00	NA	NA	Indirect Cost	22
0.00	0.00	0.00	Capital Purchase 2	20
0.00	0.00	0.00	Other Non-Personnel 2	18
0.00	NA	NA	Depreciation <sup>2</sup>	17
0.00	NA	NA	Specific Assistance To Individuals	16
0.00	0.00	0.00	Insurance	14
0.00	NA	NA	Interest 2	13
\$10,372.00	0.00	\$10,372.00	Travel/ Conferences & Meetings	11, 12
0.00	0.00	0.00	Printing & Publications	10
0.00	0.00	0.00	Equipment Rental & Maintenance	9
0.00	0.00	0.00	Occupancy	œ
0.00	0.00	0.00	Postage & Shipping	7
0.00	0.00	0.00	Telephone	თ
0.00	0.00	0.00	Supplies	σı
0.00	0.00	0.00	Professional Fee/ Grant & Award 2	4, 15
\$18,956.00	0.00	\$18,956.00	Benefits & Taxes	20
\$50,480.00	\$1,400.00	\$49,080.00	Salaries	
TOTAL PROJECT	GRANTEE MATCH <sup>3</sup>	GRANT CONTRACT	EXPENSE OBJECT LINE-ITEM CATEGORY (detail schedule(s) attached as applicable)	POLICY 03 Object Line-item Reference
			period beginning // //zoos, and ending b/30/zo10.	per log p

<sup>1</sup> Each expense object line-Item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A.* (posted on the Internet at: <a href="https://www.state.tn.us/finance/rds/ocr/policy03.pdf">www.state.tn.us/finance/rds/ocr/policy03.pdf</a>).

Applicable detail attached if line-item is funded.

A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total a Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the Match Requirement.

# Attachment A1 - Budget Summary

Application Title: Shelby County Sheriff Stop Grant Application No.: 1685 Create Date: 4/30/2009 7:37:01 AM

**Budget name:** Shelby County Sheriff Stop Grant Yr2

Status: Submitted Subm

User ID:
Submit Date: 5/1/2009 1:38:

Submit Date: 5/1/2009 1:38:19 PM

Refer to Department of Finance and Administration Policy 03, Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A for further definition of each expense object line-item in the model budget format. Policy 03 can be found on the Internet at: <a href="http://www.state.tn.us/finance/rds/policy03.pdf">http://www.state.tn.us/finance/rds/policy03.pdf</a>

\*Round all figures to the nearest whole dollar\*

93,424.00	23,356.00	70,068.00	Total Expenses	25
0.00	0.00	N/A	In-Kind Expenses	24
0.00		0.00	Administrative Expenses	22
0.00		0.00	Reimbursable Capital Purchases	20
0.00		0.00	Other Non-personnel Expenses	18
0.00		0.00	Depreciation	17
0.00		0.00	Specific Assistance to Individuals	16
0.00		0.00	Insurance	14
0.00		0.00	Interest	13
0.00		0.00	Travel / Conferences and Meetings	11,12
0.00		0.00	Printing and Publication	10
0.00		0.00	Equipment Rental and Maintenance	9
0,00		0.00	Occupancy	œ
0.00		0.00	Postage and Shipping	7
0.00		0.00	Telephone	6
0.00		0.00	Supplies	б
0.00		0.00	Professional Fees / Grants and Awards	4,15
25,715.00	6,429.00	19,286.00	Employee Benefits and Payroll Taxes	2
67,709.00	16,927.00	50,782.00	Salaries and Wages	1
Federal + Match	Match Funds	Federal Funds	Expense By Object	

\*Round all figures to the nearest whole dollar\*

TOTAL (Must equal line 25): 93,	MATCH (Must equal 25%): 23,	FEDERAL: 70,
93,424.00	23,356.00	70,068.00

23356.00	0	23356	General Operating Fund
Total	N/A	Cash	Source Cash N/L

#### Attachment A1 Summary ı Budget

Application Title: Shelby County Sheriff Stop Grant Application No.: 1685 Create Date: 4/30/2009 7:37:01 AM

**Budget name:** Shelby County Sheriff Stop Grant Yr3

Status: Submitted

**Application Type: STOP** 

User ID:

**Submit Date:** 5/1/2009 1:38:19 PM

Refer to Department of Finance and Administration Policy 03, Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A for further definition of each expense object line-item in the model budget format. Policy 03 can be found on the Internet at: <a href="http://www.state.tn.us/finance/rds/policy03.pdf">http://www.state.tn.us/finance/rds/policy03.pdf</a>

\*Round all figures to the nearest whole dollar\*

97,381.00	24,345.00	73,036.00	enses	Total Expenses	25
0.00	0.00	N/A	penses	In-Kind Expenses	24
0.00		0.00	Administrative Expenses	Administr	22
0.00		0.00	Reimbursable Capital Purchases	Reimburs	20
0.00		0.00	Other Non-personnel Expenses	Other Nor	18
0.00		0.00	on .	Depreciation	17
0.00		0.00	Specific Assistance to Individuals	Specific A	16
0.00		0.00		Insurance	14
0.00		0.00		Interest	13
0.00		0.00	Travel / Conferences and Meetings	Travel / C	11,12
0,00		0.00	Printing and Publication	Printing a	10
0.00		0.00	Equipment Rental and Maintenance	Equipmer	9
0.00		0.00		Occupancy	8
0.00		0.00	Postage and Shipping	Postage a	7
0.00		0.00		Telephone	6
0.00		0.00		Supplies	7
0.00		0.00	Professional Fees / Grants and Awards	Professio	4,15
27,401.00	6,850.00	20,551.00	Employee Benefits and Payroll Taxes	Employee	2
69,980.00	17,495.00	52,485.00	Salaries and Wages	Salaries a	٢
Federal + Match	Match Funds	Federal Funds	Expense By Object		

\*Round all figures to the nearest whole dollar\*

	TOTAL (Must equal line 25):	MATCH (Must equal 25%):	FEDERAL:
,	97,381.00	24,345.00	73,036.00

24345.00	0	24345	General Operating Fund
Total	N/A	Cash	Source

# ATTACHMENT "B"

Create Date: 4/30/2009 **Application Title:** Shelby County Sheriff Stop Grant 7:37:01 AM Application No.: 1685

> **Computer Guidelines for OCJP Grant Agencies**

Status: Submitted

Application Type: STOP

Submit Date: 5/1/2009 1:38:19

agencies funded through the Office of Criminal Justice Programs. The purpose of these guidelines is updates, and/or restrictions. Program Manager prior to the purchase of any computer equipment in order to obtain any revisions, obsolete quickly and it is important that the most current equipment is purchased. **Contact your OCJP** to obtain equipment, which will allow the user to obtain the best capability possible. computer compatibility among local agencies, the state, and the federal government. In addition, it is important The following are minimum guidelines for the computer needs of local governmental as well as non-profit Technology becomes to ensure

- Xeon DP 3.6 GHz processor with Dual Processor Capability Minimum 2 GB of SDRAM (random access memory) expandable to 16GB Minimum 3 72GB Hard drives or larger (mirrored drives preferred) 48X CD ROM Drive

- 3.5 inch floppy disk drive
- 4001 17 inch SVGA monitor
- megabytes of video RAM
- တ္ ထ MB cache or larger
- Ethernet Network Adapter Gigabit
- 10
- Suitable tape backup device and unattended backup software. Adequately sized battery backup to prevent power problems. Internal or External 56K modem to allow remote administration.

#### Workstations

- Intel Pentium D 3.2 GHz processor with an upgradeable socket (Minimum) Minimum 1 GB of DDR RAM (expandable to 4GB) 80 Gigabyte Hard drive

- CD RW / DVD RW
- 3.5 inch floppy disk drive17 inch SVGA monitor 56k v.92 baud rate fax/modem
- 47097
- Intel Graphics Accelerator 224MB
- 8 10 2 MB cache or larger
- **Ethernet Network Card Gigabit**

#### Laptops

- 440078 Pentium IV 1.83 GHz processor or higher with an upgradeable socket
  - 1 GB of SD RAM (random access memory)
  - 60 Gigabyte Fixed drive
  - CD RW / DVD RW
  - 56k v.92 baud rate fax/modem
  - 3.5 inch floppy disk drive
  - 2MB cache
- Ethernet Network Compatible Gigabit

#### **Printers**

LASER OR INK JET WITH A MINIMUM OF 600 X 600 DPI (DOTS PER INCH) RESOLUTION

#### Scanner

OPTICAL RESOLUTION 600 X 1200 (48 BIT)

#### Software

Operating System	Microsoft Windows 2000, XP or NT
Network	Windows 2000 Server
Support Software	Microsoft Office 2000 or XP Standard or Professional Word, Excel, Power Point
Out to Comment	and Access
	ProCom+ for Windows (communication software to dial in with modem).
Communication	PCAnywhere for Windows 2000,XP, NT (remote PC software) Netscape 6.2 or
	higher or Microsoft Internet Explorer 6

certifies that the person named below is considered to be certifying this application and is either the person legally responsible for committing the applying agency to this certification, or is executing this certification with the informed consent of the authorizing person (named and described in section 8 of Attachment "A"). "The Authorized Official certifies that he/she has read, understands, and agrees to purchase all computer equipment with OCJP grant funds using the OCJP minimum guidelines listed in Attachment "B" of the OCJP Grant Application and to the best of his/her knowledge and belief that he information contained in this assurance is correct and in accordance with the requirements of the application guidelines. The Authorized Official also

#### Certification

Name, Title and Address of certifying designee:

(IF DIFFERENT FROM AUTHORIZED OFFICIAL)

**Grant Coordinator** Roger Henderson

Title:

Name:

Address:

201 Poplar Avenue, Suite 9-26

Memphis

State: City:

Zip:

38103

ATACHMENT ģ

**Application Title:** Shelby County Sheriff Stop Grant

**Application No.:** 1685 **Create Date:** 4/30/2009 7:37:01 AM

Debarment

Status: Submitted

Application Type: STOF

User ID:

Submit Date: 5/1/2009 1:38:19

U.S. DEPARTMENT OF JUSTICE

OFFICE OF JUSTICE PROGRAMS

OFFICE OF THE COMPTROLLER

Certification Regarding

Debarment, Suspension, Ineligibility and Voluntary Exclusion

Lower Tier Covered transactions

(Sub-Recipient)

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 28 CFR part 67, section 67.510, and Participants' responsibilities. The regulations were published as part vii of the May 26, 1988 Federal Register (pages 19160-19211)

# (BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON PREVIOUS PAGE)

- principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its
- Ņ certification, such prospective participant shall attach an explanation to this proposal. Where the prospective lower tier participant is unable to certify to any of the statements in this

Name and Title of Authorized Official

Title: Name

Sheriff Mark H. Lutrell

Name and Address of Authorizing Agency

Name of Agency:

201 Poplar Avenue Shelby County Sheriff's Office

Memphis

CIty: Address

State:

38103

I certify that the above information in Attachment "C" is correct and accurate. Attachment C Certified

8 of attachment A)." and is either the parson legally responsible for committing the applying agency to this certification, or is executing this certification with the informed consent of the authorizing person (named and described in section contained in this certification is correct and in accordance with the requirements of the application guidelines. The Authorized Official also certifies that the person named below is consider to be certifying this application, "The Authorized Official certifies that to the best of his or her knowledge and belief that the information

Name, Title and Address of certifying designee

(IF DIFFERENT FROM AUTHORIZED OFFICIAL)

City: State: Zip: Name: Title: Address: Roger Henderson Grant Coordinator 201 Poplar Avenue, Suite 9-26

Memphis TN 38103

Application Title: Shelby County Sheriff Stop Grant Application No.: 1685

Create Date: 4/30/2009

#### ATTACHMENT ģ

OCJP Use Only Grant No

CERTIFICATION REGARDING LOBBYING Application Type: STOP

User ID:

Status: Submitted

Submit Date: 5/1/2009 1:38:19

Each person shall file the most current edition of this certification and disclosure form, if applicable, with each submission that initiates agency consideration of such person for an award of a Federal contract, grant, or cooperative agreement of \$100,000 or more; or Federal loan of \$150,000 or more.

made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more that \$100,000 for each such failure. This certification is a material representation of fact upon which reliance was placed when this transaction was

The undersigned certifies, to the best of his or her knowledge and belief, that:

- employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of No Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, and officer or
- Ņ any Federal contract, a grant, loan or cooperative agreement. If any non-Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall initial here and compete and submit Standard Form # LLL, "Disclosure of Lobbying Activities", in accordance with its instructions. If your response to Lobbying is Not Applicable, then please enter 'N/A' (with slash) to indicate that choice. **You cannot leave this box blank.**
- ω The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers and that all subrecipients shall certify and disclose accordingly.

Name and Address of Authorizing Agency: Name and Title of Authorized Official:

Name of Authorized Official:

Title of Official: Mayor

Shelby County Government

160 North Main

Memphis

City:

Address: Name of Agency:

I certify that the above information in Attachment "D" is correct and accurate. Attachment D Certified

contained in this certification is correct and in accordance with the requirements of the application guidelines. The Authorized Official also certifies that the person named below is either the person legally responsible for committing the applying agency to this certification, or is executing this certification with the informed consent of the authorizing person (named and described in section 8 of attachment A)." The Authorized Official certifies that to the best of his or her knowledge and belief that the information

Name, Title and address of certifying designee:

(IF DIFFERENT FROM AUTHORIZED OFFICIAL)

Grant Coordinator Roger Henderson

He: Name:

Address: 201 Poplar Avenue, Suite 9-26

State: Zip: City: Memphis

#### ATACH MEN esi esi m

**Application Title:** Shelby County Sheriff Stop Grant **Application No.: 1685** 

7:37:01 AM Create Date: 4/30/2009

Status: Submitted

Application Type: STOP

Submit Date: 5/1/2009 1:38:19

TENNESSEE CERTIFICATION OF COMPLIANCE WITH REGULATIONS FROM U. S. DEPARTMENT OF JUSTICE OFFICE OF JUSTICE PROGRAMS, OFFICE FOR CIVIL RIGHTS

identifying under Part "I", the person responsible for reporting civil rights findings and under Part "II" checking one certification (A, B, C1, C2) that applies to your agency. Please obtain the signature of the Authorized Official at the bottom of page 2, forward a copy of this form to the person identified under Part "I", and return the original copy of the form to the Office of Criminal Justice Programs, William R. Snodgrass Tennessee Tower, 312 8th Ave North, 12th Floor, Nashville, TN 37243-1700 with your signed contracts. FOR SUBGRANTS ISSUED BY THE TENNESSEE DEPARTMENT OF FINANCE AND ADMINISTRATION,
OFFICE OF CRIMINAL JUSTICE PROGRAMS, NASHVILLE, TENNESSEE
INSTRUCTIONS: Complete the identifying information below. Read Parts I and II of this form completely,
identifying under Part "I", the person responsible for reporting civil rights findings and under Part "II" checking

Grant Number:

Grant Project Title: Shelby County Stop Grant 2009

Subgrantee): Agency Name (Funded Shelby County Sheriff's Office

Address: 201 Poplar Avenue, Suite 9-26

City: State: Memphis

Zip: Duration of Grant 38103

Begin Date:

Award Amount: (\$) End Date: \$291,892 6/30/2012

Project Director's Name: 901-545-5591 Roger Henderson

**AUTHORIZED OFFICIAL'S CERTIFICATION:** As the Authorized Official for the above Subgrantee Agency, I certify, by my signature at the end of this form, that I have read and am fully cognizant of our duties and responsibilities under this Certification.

amount awarded) are subject to prohibitions against discrimination in any program or activity, and must take reasonable steps to provide meaningful access for persons with limited English proficiency. I. REQUIREMENTS OF SUBGRANTEE RECIPIENTS: All subgrant recipients (regardless of type of entity or

- I certify that this agency will maintain data (and submit when required) to ensure that: our services are delivered in an equitable manner to all segments of the service population; our employment practices comply with Equal Opportunity Requirements, 28 CFR 42.207 and 42.301 et. Seq.; our projects and activities provide meaningful access for people with limited English proficiency as required by Title VI of the Civil Rights Act, (See also 2000 Executive Order #13166).
- if any, to the Tennessee Office of Criminal Justice Programs within the Department of Finance and Administration within 45 days of the finding, and/or if the finding occurred prior to the grant award beginning date, within 45 days of the grant award beginning date. A copy of this Certification will be I also certify that the person in this agency or unit of government who is responsible for reporting formal provided to this person, as identified below: and informal civil rights complaints and/or findings of discrimination will submit these complaints finding,

discrimination: Person identified as the Agency Compliance Coordinator responsible for reporting civil rights finding of

Title: Name: Administrator Carolyn Watkins

City: State: Address: Memphis 160 North Main, Suite 969

38103

Zip:

Attachment E Page 2 of 3

Phone: 901-545-

# II. EQUAL EMPLOYMENT OPPORTUNITY PLAN (EEOP) CERTIFICATIONS:

agency/funding entity.) Select the certification (A, B, C1 or C2 below) that applies: (Only one Certification may be checked per

# $\bigcirc$ CERTIFICATION "A" [NO EEOP IS REQUIRED IF (1), (2) or (3), below, apply.

(This Certification applies to most non-profits and small agencies.) Check (1), (2) and/or (3) as they apply to your entity. (More than one may apply.)

This funded entity has not been awarded more than \$1 million cumulatively from all programs administered by the U.S. Department of Justice over an 18-month period that includes the above grant duration period, and:

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	2
	education
	<u>a</u>
	medical
	2
	non
	-profit
	$\square$ (1) is an educational, medical or non-profit institution or an Indian Tribe;
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	Indian
	Tribe;

(2) has less than 50 employees; and/or

Justice Programs less than \$25,000 in federal U. S. Department of Justice  $\mathbb{L}(3)$  was awarded through this grant from the Tennessee Office of Criminal

Therefore, I hereby certify that this funded entity is not required to maintain an EEOP, pursuant to 28 CFR 42.301. et seq.

# (a) CERTITICATION "B" [EEOP MUST BE ON FILE]

duration period employees, was awarded, through this grant from the Tennessee Office of Criminal Justice Programs, more than \$25,000, but less than \$500,000 in federal U. S. Department of Justice funds. Also, it has not been awarded more than \$1 million cumulatively from all programs administered through federal grant funding over an 18-month period that includes the above This funded entity, as a for-profit entity or a state or local government having 50 or more the above grant

Civil Rights, Office of Justice Programs as required by relevant laws and regulations review or audit by officials of the Tennessee Office of Criminal Justice Programs or the Office for into effect by the proper authority and disseminated to all employees, and that it is on file for Opportunity Plan in accordance with 28 CFR 42.301 et. seq., sub part E, that it has been signed Therefore, I hereby certify that the funded entity has formulated an Equal Employment

# OCERTIFICATION "C1" (EEOP MUST BE SUBMITTED)

employees, was awarded, through this grant from the Tennessee Office of Criminal Justice Programs, more than \$500,000 in federal U. S. Department of Justice funds, but it has not been funding over an 18-month period that includes the above grant duration period awarded more than \$1 million cumulatively from all programs administered through federal grant This funded entity, as a for-profit entity or a state or local government having 50 or more

Therefore, I hereby certify that the funded entity will submit, within 45 days of the award, an Equal Employment Opportunity Plan or an EEOP short form, that will include a section specifically analyzing the subgrantee (implementing) agency, to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

# CERTIFICATION "C2" (EEOP MUST BE SUBMITTED)

httn://ocingrantann.state.tn iis/Annlications/atte.asnx?nrn=Triie

This funded entity, as a for-profit entity or a state or local government having 50 or more employees has been awarded \$1 million cumulatively from all programs administered by the U.S. Department of Justice or any federal agency, including this subgrant from the Tennesse subgrant from the Tennessee Office of Criminal Justice Programs, over an 18-month period that includes the above grant duration period

applicable to this time period, send a copy of the letter received from the Office for Civil Rights showing that your EEOP is acceptable.) analyzing the subgrantee (implementing) agency. (If you have already submitted an EEOP Equal Employment Opportunity Plan or an EEOP short form, that will include a section specifically Therefore, I hereby certify that the funded entity will submit, within 45 days of the award, an

I certify that I have read and am fully cognizant of our duties and responsibilities under this Certification.

### Attachment E Certified

of the authorizing person (named and described in section 8 of attachment A)." committing the applying agency to this certification, or is executing this certification with the informed consent "The Authorized Official certifies that to the best of his or her knowledge and belief that the information contained in this certification is correct and in accordance with the requirements of the application guidelines. The Authorized Official also certifies that the person named below is either the person legally responsible for

Name, Title and address of certifying designee:

(IF DIFFERENT FROM AUTHORIZED OFFICIAL)

City: Address: Title: Name: Memphis Grant Coordinator 201 Poplar Avenue, Suite 9-26 Roger Henderson

State: 38103

Zip:

#### ATTACHMENT "

Create Date: 4/30/2009 **Application No.: 1685 Application Title:** Shelby County Sheriff Stop Grant

Status: Submitted

Application Type: STOF

Submit Date: 5/1/2009 1:38:19

Certification of Compliance with the Statutory Eligibility Requirements of the Violence Against

Women Act as Amended to attest. Applicants should also review the instructions for certification included in the program regulations Applicants should refer to the regulations cited below to determine the certifications to which they are required

Requirement" and "Filing Costs for Criminal Charges." The certifications shall be treated as a material representation of fact upon which the Department of Justice and the Office of Criminal Justice Programs will rely before completing this form. Signature on this form certifies that the subrecipient is qualified to receive the funds and provides for compliance with relevant requirements under 28 CFR Part 90 "Rape Payment". when it determines to award the covered transaction, grant, or cooperative agreement.

Any subrecipient shall be qualified for funds provided under the Violence Against Women Act upon certification that:

۳ the funds will be used only for the purposes described in 42 U.S.C., 3796gg(b) under the "Grants Combat Crime Against Women" program authority; 6

In addition, as required by Sections 2005 and 2006 of Title IV of the Violent Crime Control and Law enforcement Act of 1994, Pub. L. 103-322 (September 13, 1994), which, in part, amends the Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 U.S.C. 3711 et seq. (by adding a new "Part T.' Part T comprises Sections 2001 through 2006, codified at 42 U.S.C. 3796gg through 3796gg-5), and implemented at 28 CFR Part 90., for persons entering into a grant or cooperative agreement, as defined at 28 CFR Part 90, the application certifies that:

# Forensic medical Excamination Payment Requirement for Victims of Sexual Assault

- 0 The subrecipient incurs the full out-of-pocket costs of forensic medical exams for victims of sexual
- 0 Exams to victims are provided free of charge to the victims;
- 0 0
- Arranges for victims to obtain such exams free of charge to the victims; and The subrecipient provides information at the time of the exam to all victims, including victims with limited or no English proficiency, regarding how to obtain reimbursement. Section 2005 (b), codified at 42 U.S.C. 3796gg-4(b.)
- 0 victims to seek reimbursement from insurance, and Grantees can use STOP funds to pay for exams by a trained examiner if they do not require
- 0 exam payment Grantees cannot require that victims participate in the criminal justice system as a condition for

#### 2 Filing **Costs for Criminal Charges**

- 0 A subrecipient will not be entitled to funds unless it
- protection order, or witness subpoena, whether issued inside or outside the state or local or the costs associated with the issuance, registration, or service of a warrant, petition for the victim bear the costs associated with the filing of criminal charges against the offender, protection order, to protect a victim of domestic violence, stalking, or sexual assault the filing, issuance, registration, or service of a protection order or a petition for a certifies that its laws, policies and practices do not require, in connection with the prosecution of any misdemeanor or felony domestic violence offense, or in connection with

## ω **Gun Control Laws Related to Domestic Violence**

- o certifies that its judicial policies and practices include notification to domestic violence offenders of federal gun control laws related to domestic violence and any related federal, state or local laws.

  Polygraph Examination for Victims of Alleged Sexual Offenses
- 4.
- certifies that its laws, policies, and practices will ensure that victims of alleged sex offenses will not be asked to submit to a polygraph examination as a condition for proceeding with the investigation of the offense

certify that I have read and am fully cognizant of our duties and responsibilities under this Certification

#### Certified

"The Authorized Official certifies that to the best of his or her knowledge and belief that the information contained in this certification is correct and in accordance with the requirements of the application guidelines. The Authorized Official also certifies that the person named below is either the person legally responsible for committing the applying agency to this certification, or is executing this certification with the informed consent of the authorizing person (named and described in section 8 of attachment A)."

Name, Title and Address of certifying designee:

(IF DIFFERENT FROM AUTHORIZED OFFICIAL)

Title: Name: Roger Henderson

Address: Grant Coordinator 201 Poplar Avenue, Suite 9-26

Memphis

38103 뒫

State: Zip: City:

Back

(\*) Required Field

**Application No.: 1685 Application Title:** Shelby County Sheriff Stop Grant

Create Date: 4/30/2009 7:37:01 AM

ATTACHMENT "G"

Status: Submitted

**Application Type: STOP** 

Submit Date: 5/1/2009 1:38:19

# Certification of Compliance with the Consultation and Documentation Requirement of the Violence Against Women Act as Amended

(Note: If "Not Applicable" fields below are not required)

(Required as an attachment to each New Prosecution, Law enforcement or Court Application)

or local victim services programs during the course of developing our grant applications in order to ensure that proposed activities and equipment acquisitions are designed to promote the safety, confidentiality, and economic independence of victims of domestic violence, sexual assault, stalking and dating violence. As a new or continuing Prosecution, Law enforcement, Court or tribal, territorial or State applicant for Violence Against Women formula grant funding in Tennessee, I certify that I have consulted with tribal, territorial, State

# VICTIM SERVICES PROGRAMS I CONSULTED WITH:

Agency Name Shelby County Victim Assistance Center

Agency Address 600 Adams Avenue

Phone Number Agency Director 901-545-4357 Anna Whaley

Agency Name

Agency Address

Agency Director

Phone Number

As the duly authorized representative of the applicant, I hereby certify that, as the applicant, I have complied with above certifications.

Agency Name Shelby County Sheriff's Office

Name of Applicant Roger Henderson Title Grant Coordinator Telephone Number 901-545-5591

Back